

**North Carolina Division of Aging and Adult Services
Family Caregiver Support Program State Monitoring Tool
2008-2009**

(* designates compliance items)

Region: _____

Review Date: _____

Interviewer: _____

Person(s) Interviewed and Title: _____

.....
DAAS ONSITE AND DESK REVIEW:

A. Services for FCSP are –

☐ Provided by AAA under the following categories:

☐ With Waiver (Exhibit 11)

Waiver approved for:

☐ Category I _____

☐ Category II (other than I & A) _____

☐ Category III _____

☐ Category IV _____

☐ Category V _____

☐ AAA subcontracts with local providers under the following categories:

☐ Category I

☐ Category II

☐ Category III

☐ Category IV

☐ Category V

☐ AAA has no direct caregiver services or subcontracts

B. AAA's client reporting data corresponds with ARMS*

(Access database report reflects activities and clients served corresponding with AAA's Area Plan Exhibits 28a-e)

☐ No

☐ Yes

Comments:

C. Reported client data confirm that priority groups are being targeted*

1. Older individuals with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas. (Evidence of outreach efforts targeting priority group: e.g., outreach materials, strategies, outreach activities, partners, etc.)

☐ No

☐ Yes

Comments:

2. Family caregivers who provide care for individuals with Alzheimer's Disease and related disorders with neurological and organic brain dysfunction and for grandparents or older individuals who are relative caregivers. (Evidence of outreach efforts targeting priority group: e.g., outreach materials, strategies, outreach activities, partners, etc.)

☐ No

☐ Yes

Comments:

3. Promote quality and continuous improvement in the support provided to family and other informal caregivers of older individuals through activities that include program evaluation, training, technical assistance, and research, including: (Part A, Sec. 411(a)(11) (Progress Check database reflects activities and clients served corresponding with 2008-12 Area Plan Exhibits 28a-e)

A. Programs addressing unique issues faced by rural caregivers

☐ Yes

☐ No

Comments:

B. Programs focusing on the needs of older individuals with cognitive impairment, such as Alzheimer's Disease and related disorders, with neurological and organic brain dysfunction, and their caregivers: and

☐ Yes

☐ No

Comments:

C. Programs supporting caregivers in the role they play in providing disease prevention and health promotion services

☐ Yes

☐ No

Comments:

D. Reported client data and documentation from provider assessments confirm that older individuals' (care recipients') services meet definition of frail for caregivers receiving services in Categories IV and V *

(for D -1 & 2 registered client data and assessment records will be reviewed)

1. The recipient is unable to perform at least 2 ADLs without substantial human assistance, including verbal reminding, physical cueing , or supervision, **OR** (see #2)

☐ No

☐ Yes

Comments:

2. Due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individual or to another individual.

☐ No

☐ Yes

Comments:

E. 1. Comparison of the FCSP Budget in ARMS to the ZGA 517 report (List only entries with discrepancies)

[illegible]

2. Based on budget in self-assessment tool, interviewer will verify records, receipts, and other items.

List items verified	Amount	Period Reviewed	Comments	Compliance Yes/No

3. Based on the most current ZGA report, list providers with utilization of **± 5%** of year-to-date (YTD) utilization target.

(A) Provider	(B) Budgeted Amount (ZGA517)	(C) Total Amount Reimbursed YTD	(E) % of Utilization (reimbursement total/budget)	(F) Projected % (month/12)	(G) Percentage under or over

3. Based on numbers in Column (G) does at least one provider or (AAA) have fund utilization of 5% under or over targeted percent?

- ☐ Yes
☐ No

5. If provider's expenditures are under target, detail AAA's response. Is plan feasible plan for expending the grant?

6. Based on the most current ZGA analysis allowable percentages of the total funds allocated are budgeted for:

a. Category 5 (supplemental services)—20%

☐ No

☐ Yes

Comments:

b. GRG services—10%

☐ No

☐ Yes

Comments:

F. Program Integrity

1. DAAS will review at least one contract sample per county. Corresponding monitoring will be reviewed. (Exhibit 12) (DAAS Administrative Letter NO. 01-6, FCSP Discussion Forum posting and email 1/17/02 and 1/18/02.) See checklist for contracts below. Explanation: AAA contracts and sub-contracts are sufficient to cover required areas of service delivery, reimbursement, and quality assurance. * (DAAS Administrative Letter No. 01-6).

Are AAA contracts for FCSP services complete?

☐ Yes

☐ No

Contracts Review FCSP

- ☐ 1. Contracts are in writing with all terms in one instrument.
- ☐ 2. Signature lines and date lines are provided for authorized representatives.
- ☐ 3. The names and addresses of the sub-recipient and the contractor (AAA) are listed.
- ☐ 4. Service area (geographic) defined.
- ☐ 5. Provisions for termination of the contract defined as either by mutual consent or by 30 days written notice to the other party. The termination clause should include provisions that in the event reimbursement to the Contractor (AAA) is reduced or terminated, the same reduction or termination will follow to the sub-recipient.
- ☐ 6. Contract includes a provision for amending the contract should changes be required by the contractor. Examples of changes are: changes to the scope of services, amount of funding, etc.
- 7. All applicable audit requirements http://www.ncdhhs.gov/aging/monitor/Fiscal_MonitoringTool-I.pdf
- 8. Provisions to include the following:
 - ☐ a. assurance of civil rights compliance
 - ☐ b. confidentiality safeguards
 - ☐ c. compliance with the Americans with Disabilities Act (1990)
 - ☐ d. compliance with Section 504 of the Rehabilitation Act (1973)
 - ☐ e. access to records
 - ☐ f. terms of subcontracting
 - ☐ g. liabilities
 - ☐ h. conflict of interest, if applicable
 - ☐ i. insurance requirements
 - ☐ j. care of property, if applicable
- ☐ 9. Lobbying, Debarment, Drug Free Work Place and Conflict of Interest Policy forms for signature, if applicable. (Lobbying and Debarment and Drug Free Workplace forms are required for all providers except federal agencies. The conflict of interest form is required for all private non-profit agencies, regardless of funding source.)
- ☐ 10. Tax exempt status letters from the IRS (required for all non-profit agencies)

Service Provision policies and applicable standards:

- ☐ 11. The contract defines the beginning and ending date coinciding with the period of the funding allocation. The contract period should not exceed 12 months.
- ☐ 12. Funding source cited.
- ☐ 13. The total amount to be reimbursed under the contract as well as billing and reimbursement procedures, any reporting requirements and the required match must be defined in the contract. (no match requirement at the local level this year, 08-09)
- ☐ 14. If required, a line item budget should be attached.
- ☐ 15. Target population defined (eligibility)
- ☐ 16. Priority groups defined
- ☐ 17. Service category for service delivery is identified
- ☐ 18. Service category is defined
- ☐ 19. Contract spells out how the money will be drawn down.
 - ☐ A. Definitions of reporting "units" or "hours" for reimbursement, e.g., by hour, by meal,

by occurrence, by daily rate, by line-item expenditure, etc.)

- ☐ B. What will be accepted as proof for reimbursement (e.g., receipts for purchase, time sheets, etc.)
- ☐ C. When items for reimbursements due and when will be paid.
- ☐ 20. Reporting requirements (client data needed, how often to submit reports and the process for submitting reports) included.
- ☐ 21. Cost-sharing expectations (units of service, if applicable, should be defined as well as the cost-sharing requirements to be followed by the subrecipient as well as contributions to the cost of Category II –V).
- ☐ 22. Category IV (respite) and V (supplemental services) assurance that the recipients of services should meet the definition of " frail". (Definition of frail provided)
- ☐ 23. Specifics of service delivery are defined.
- ☐ 24. Objectives of service included.
- ☐ 25. Reference to performance standards or expectations set by DAAS, the AAA or other service provision authorities and how it will be monitored.
- ☐ 26. **IF RFP is cited in contract in place of specific service provision information, it must be attached**

Comments: (add another page, if needed)

27. DAAS will review letters of agreement and purchase of service for FCSP funding when used instead of contracts.

G. Documentation on file that AAA has appropriately monitored subcontracts.*

(i.e., annual monitoring of subcontracts, subcontractor meeting terms of contract, etc.)

(DAAS will review Area Plan Exhibit 12, monitoring /assessment notes, letters to provider, and follow up activities)

☐ Yes

☐ No

Explanation:

H. Consumer Contributions* (new policy 05)

There is method in place to ensure that providers are conducting participant contribution activities consistent with DAAS state policy:

(<http://www.dhhs.state.nc.us/aging/consumercontributions.htm>)

(Verified by terms of contracts, service agreements, provider assessment documentation, and client records.)

☐ Yes

☐ No

Explanation:

I. AAA's progress in implementation of most current approved FCSP work plan is on target.* (review of most current ZGA, Progress Check report, documentation and discussion)

1. Exhibit Area Plan 28a

☐ Yes

☐ No

Explanation:

1. Exhibit Area Plan 28b

☐ Yes

☐ No

Explanation:

2. Exhibit Area Plan 28c

☐ Yes

☐ No

Explanation:

3. Exhibit Area Plan 28d

☐ Yes

☐ No

Explanation:

4. Exhibit Area Plan 28e

☐ Yes

☐ No

Explanation:

J. Family Caregiver Support Program

1. Partnerships

In order to create and maintain a multifaceted system of support, the FCSP shall collaborate with traditional and non-traditional partners to add resources and enhance existing resources. Verification of these functions of the AAA will be monitored through Progress Check entries through documentation of meetings, events, media publicity, etc.

☐ Yes

☐ No

Explanation:

2. Family Caregiver Support Program: Information and Assistance

All caregivers will have easy access to information on assistance, services, and supports regardless of barriers. Verification of these functions of the AAA will be monitored through documentation of meetings, events, media publicity, publications, etc.

☐ Yes

☐ No

Explanation:

3. Family Caregiver Support Program: Caregiver Needs/Services

FCSP will assure that caregivers' various needs will be sufficiently met through a range of services. Verification of these functions of the AAA will be documented through Progress Check entries of resources within region, caregiver involvement in decision making, etc.

☐ Yes

☐ No

Explanation:

4. **Family Caregiver Support Program: Quality of Caregiver Supports**
FCSP will provide quality services in a timely and responsive manner that meet customer satisfaction requirements Verification of these functions of the AAA through documentation in Progress Check of resources within region, planning activities, caregiver involvement in decision making, etc.

☐ Yes

☐ No

Explanation:

5. **Family Caregiver Support Program: Diversity**
FCSP will develop programs that meet the multifaceted needs of diverse caregiver populations. Verification of these efforts will be monitored through Progress Check entries.

☐ Yes

☐ No

Explanation:

NOTES:

Revised: 12-19-07
6-03-08
10-27-08